## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	PAGE 1 OF 4 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
Planned Parenthood Votes	C C00489799			
	O states			
Check if 24-hour report X 48-hour report New report Amends report filed on Amends report filed on				
Full Name of Payee O'Brien Garrett (formerly known as OMP Inc.)	Date of Public Distribution/Dissemination			
,	06 22 2016			
Mailing Address 1133 19th St. NW #300	Amount			
City State Zip Code	2873.29			
Washington DC 20036	Transaction ID : B617857  Date of Disbursement or Obligation			
Purpose of Expenditure Printing of mail piece  Category/ Type	001 06 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate Suppo	ort Office Sought: House District:			
Hillary Clinton Oppor				
Calendar Year-To-Date Per Election for Office Sought 25909.56	Disbursement For: ☐ Primary ☐ General 2016 ☐ Other (specify) ▶			
Full Name of Payee	Date of Public Distribution/Dissemination			
O'Brien Garrett (formerly known as OMP Inc.)	06 22 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 1133 19th St. NW #300	Amount			
City State Zip Code Washington DC 20036	1133.27 Transaction ID : B617858			
Purpose of Evpenditure	Date of Disbursement or Obligation			
Postage for mail piece Category/ Type	001 06 / 22 / 2016			
Name of Federal Candidate Supp				
Hillary Clinton Oppo	se President Senate State: US			
Calendar Year-To-Date Per Election for Office Sought 25909.56	Disbursement For: Primary General 2016 Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures	4006.56			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Deirdre Schifeling [Electronically Filed]	Date 07 15 2016			
Signature				

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	LAFEND			PAGE 2 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes				C C00489799
Check if 24-hour report				
Full Name of Payee Planned Parenthood Action Fund In	nc.		Date	of Public Distribution/Dissemination
Mailing Address 123 William St, 10th Floor			Amo	06 22 2016 unt
City New York	State NY	Zip Code 10038		38.45 saction ID : B619952
Purpose of Expenditure List rental		Category/ Type 003		of Disbursement or Obligation  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Soug	ht: House District:
Hillary Clinton		Oppose	X Presid	
Calendar Year-To-Date Per Election for Office Sought	7	25909.56	Disburseme	nt For:
Full Name of Payee			Date	of Public Distribution/Dissemination
Planned Parenthood Action Fund Inc.				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 123 William St, 10th Floor			Amo	unt
City	State	Zip Code		38.45
New York	NY	10038		saction ID : B619955 of Disbursement or Obligation
Purpose of Expenditure List rental		Category/ Type 003		M 06
Name of Federal Candidate		Support	Office Soug	ht: House District:
Donald Trump		X Oppose	X Presi	dent Senate State: US
Calendar Year-To-Date Per Election for Office Sought	, , ,	25909.56	Disburseme 2016	ent For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditure	25			76.90
(a) CODICINE OF NOTIFICE MADE POPULATION EXPONENTIAL				70.90
(b) SUBTOTAL of Unitemized Independent Expendit	tures		· •	7
(c) TOTAL Independent Expenditures			• [	7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Deirdre Schifeling Signature	[Electron	ically Filed] Date	e 07	15 / 2016

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)				FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes				C C00489799
Check if 24-hour report 48-hour report	New rep	port Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee O'Brien Garrett (formerly known as	OMP Inc.)		Date	e of Public Distribution/Dissemination
` '				06 22 2016
Mailing Address 1133 19th St. NW #300			Amo	punt
City	State	Zip Code		1133.27
Washington	DC	20036		nsaction ID : B617859 e of Disbursement or Obligation
Purpose of Expenditure Postage for mail piece		Category/ Type 001		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Soug	ght: House District:
Donald Trump		Oppose	X Presi	dent Senate State: US
Calendar Year-To-Date Per Election for Office Sought	7 7	25909.56	Disburseme 2016	ent For: Primary ⊠ General Other (specify) ▶
Full Name of Payee	·MD In a )		Date	e of Public Distribution/Dissemination
O'Brien Garrett (formerly known as O	WP Inc.)			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1133 19th St. NW #300			Amo	punt
City	State	Zip Code	$ \Gamma$	2873.29
Washington	DC	20036		saction ID : B617860 e of Disbursement or Obligation
Purpose of Expenditure Printing of mail piece		Category/ Type 001		06 22 Y 2016
Name of Federal Candidate		Support	Office Sou	ght: House District:
Donald Trump		X Oppose	X Presi	
Calendar Year-To-Date Per Election for Office Sought		25909.56	Disburseme 2016	ent For: Primary X General
				Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditure	'es		· ·	4006.56
(b) SUBTOTAL of Unitemized Independent Expendi	itures		·· •	
(c) TOTAL Independent Expenditures			·· •	171171171
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized	•		•
Deirdre Schifeling	[Electron	nically Filed] Date	e 07	15 2016
Signature				

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)		PAGE 4 OF 4 FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼		
Planned Parenthood Votes		C C00489799		
Check if 24-hour report				
Full Name of Payee Drew & Rogers, Inc.		Date of Public Distribution/Dissemination		
		07 14 2016		
Mailing Address 30 Plymouth Street		Amount		
City State	Zip Code	7819.54		
Fairfield NJ	07004	Transaction ID : B619964 Date of Disbursement or Obligation		
Purpose of Expenditure Printing & shipping of promotional items-Estimated cost	Category/ Type 003	07 14 2016		
Name of Federal Candidate	Support Offi	ce Sought: House District:		
Donald Trump		President Senate State: US		
Calendar Year-To-Date Per Election for Office Sought	25909.56 Disi 201	oursement For:  Primary		
Full Name of Payee		Date of Public Distribution/Dissemination		
SKDKnickerbocker		07 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 1150 18th St., NW #800		Amount		
City State	Zip Code	10000.00		
Washington DC	20036	Transaction ID : B619968  Date of Disbursement or Obligation		
Purpose of Expenditure Online ad production-Estimated cost	Category/ Type 003	07 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate	Support Offi	ce Sought: House District:		
Trump / Pence	X Oppose	President Senate State: US		
Calendar Year-To-Date Per Election for Office Sought	25909.56 Dis 20°	bursement For:  Primary		
•				
(a) SUBTOTAL of Itemized Independent Expenditures	·····	17819.54		
(b) SUBTOTAL of Unitemized Independent Expenditures	·····			
(c) TOTAL Independent Expenditures	·····	25909.56		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Deirdre Schifeling	lectronically Filed] Date	07 15 2016		
- 3				